

**“WALKING EPIDURAL ANALGESIA DURING LABOUR
ITS EFFICACY ON PAIN RELIEF, ITS INFLUENCE ON PROGRESS
OF LABOUR, OUTCOME OF DELIVERY.**

ABSTRACT

AIM OF THE STUDY:

To compare the effect of epidural analgesia with walking epidural analgesia on

- 1.pain relief
- 2.labour progress and
3. mode of delivery.

DESIGN OF THE STUDY:

Non randomised controlled clinical trial.

SAMPLING METHOD:

Convenient sampling technique

PERIOD OF STUDY:

January2014 to August 2014

SAMPLE SIZE:

GROUP A: Epidural group- 25

GROUP B: Walking epidural group

STUDY METHOD:

Antenatal women who crossed 37 weeks of gestation attending Obstetrics and Gynaecology department, Govt. Rajaji Hospital, Madurai, fulfilling the inclusion criteria who were willing to participate were enrolled. Procedure was explained to the patient and Informed consent was obtained. After proper clinical examination and confirming the fetal wellbeing using cardiotocogram, pre anesthetic assessment was done. The parturients are preloaded with 500-1000ml of ringer lactate. Under aseptic precautions, 25 antenatal women in group A are given 0.25% bupivacaine and 50 micrograms of fentanyl epidurally. 25 antenatal women in group B are given 0.0625% bupivacaine and 25 micrograms of fentanyl. Adequate level of analgesia was obtained and time of onset of analgesia was recorded. The vitals and fetal heart rate were monitored frequently. Pain relief was assessed using Visual analogue scale on 1-10 scale. Motor blockade assessed using Modified Bromage score. During first stage of labour the parturients in group A remained recumbent and parturients in group B were allowed to sit in the bed or walk around the bed with support on both sides. Progress of labour was monitored using partograph. Outcome of delivery was recorded. Parturient were monitored frequently for any complications.

RESULTS:

- In both the groups drug was initiated at different stages of cervical dilation.
- There was no hypotension recorded in both the groups. All parturients had mean Systolic BP of more than 100mmHg.
- All the parturients in both the groups had excellent to good pain relief with a pain score of around 1 to 2 after 15 minutes of drug administration.
- All the parturients in walking epidural group had a modified Bromage scale of 5 or 6 and all the parturients ambulated for a period of around 10-20 minutes.
- The number of topup doses required was more in epidural group than walking epidural group.
- The mean duration of first stage of labour was 308 minutes in epidural and 296 minutes in walking epidural group.
- The mean duration of second stage of labour was 90 minutes and 51 minutes in epidural and walking epidural group. The mean duration of third stage of labour was 7 minutes in both the group.
- The rate of instrumental delivery was 24% in epidural and 8% in walking epidural group.
- The rate of LSCS was same in both the groups.

- The incidence of complications were more in epidural compared to walking epidural group.

CONCLUSION:

There is significant reduction in pain perception in the parturients receiving walking epidural analgesia irrespective of the gravida status. There is no undue prolongation of duration of labour in both primi and multigravida. Also walking epidurals do not increase the need for instrumental deliveries.

So laboring women opting for pain relief should be explained about the benefits of walking epidurals and offered the choice of walking epidural analgesia.

KEY WORDS: Walking epidural, bupivacaine, fentanyl, visual analogue scale, modified bromage scale.